Docket No. 44657-AAA-PCT-US/JPW/GJG/BJAIN THE UNITED STATES PATENT AND TRADEMARK OFFICEApplicant(s): Joseph R. BergerSerial No. : 10/052,961Examiner: S. WangFiled : January 18, 2002Group Art Unit: 1617For : A METHOD FOR AMELIORATING MUSCLE WEAKNESS/WASTING IN A PATIENT  
INFECTED WITH HUMAN IMMUNODEFICIENCY VIRUS-TYPE 1

Mail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: August 23, 2007

Sir:

Transmitted herewith is an amendment to the above-identified application.

  x   Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

       A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

       No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend-ment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	18 -	* 20 =	*** 0 X	\$25	\$50	=	0.00	
Indepen- -dent Claims	3 -	** 3 =	*** 0 X	\$100	\$200	=	0.00	
Multiple Dependent Claim(s) Presented For First Time Yes <u>  x  </u> No				\$180	\$360	=	0.00	
				TOTAL ADDITIONAL FEE			\$ 0.00	

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

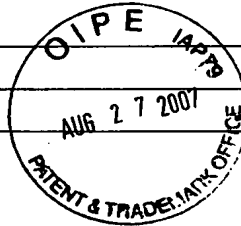
\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

Applicant(s): Joseph R. Berger

Serial No. : 10/052,961

Filed : January 18, 2002

Amendment Transmittal Letter  
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The following are also enclosed:

  X   One additional copy of this Amendment Transmittal Letter

  X   Return Receipt Postcard

  x   An Information Disclosure Statement, including Form PTO-1449  
(Copies of citations included: Yes   x   No         
and a fee of \$                    included)

  x   A Petition for an Extension of Time, including a fee of  
\$   225.00   for a Petition for   2   Month(s) Extension of Time

  x   Other (identify):   \$395.00 fee for filing the accompanying Request    
                                    For Continued Examination                                    

THE TOTAL FEE DUE IS \$   620.00  .

  x   A check in the amount of \$   620.00   is enclosed.

       Please charge Deposit Account No.                    in the amount of  
\$                   .

  X   The Commissioner is hereby authorized to charge any additional fees  
required or credit any overpayment to Deposit Account No.   03-3125    
as follows:

  X   Fees under 37 C.F.R. §1.16 for the presentation of extra claims  
  x   Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,

I hereby certify that this  
correspondence is being deposited this  
date with the U.S. Postal Service with  
sufficient postage as first class mail  
in an envelope addressed to:

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450.

  Gary J. Gershik   8/23/07  
Date  
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